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Bib Data Sheet

CONFIRMATION NO. 4612

|  |   |                               |   |   |                                 |
|--|---|-------------------------------|---|---|---------------------------------|
| <b>SERIAL NUMBER</b><br>09/972,775   | <b>FILING DATE</b><br>10/05/2001<br><b>RULE</b>   | <b>CLASS</b><br>709           | <b>GROUP ART UNIT</b><br>2151   | <b>ATTORNEY DOCKET NO.</b><br>100.252US01 |                                 |
| <b>APPLICANTS</b><br>Eric James Gieseke, Lincoln, MA;<br>Huimin Li, Shrewsbury, MA;  |   |                               |   |   |                                 |
| ** CONTINUING DATA *****   |   |                               |   |   |                                 |
| ** FOREIGN APPLICATIONS *****  |   |                               |   |   |                                 |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br>** 11/13/2001  |   |                               |   |   |                                 |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR COUNTRY</b><br>MA | <b>SHEETS DRAWING</b><br>7  | <b>TOTAL CLAIMS</b><br>14                 | <b>INDEPENDENT CLAIMS</b><br>11 |
| <b>ADDRESS</b><br>27073  |   |                               |   |   |                                 |
| <b>TITLE</b><br>SNMP agent object model  |   |                               |   |   |                                 |
| <b>FILING FEE RECEIVED</b><br>1542   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                 |